



**Facility Reservation Request Form**

Program Area:            Club Sports            Instructional Sports            Intramural Sports            Adventure Rec.  
                                 Aquatics            Other

Contact Name: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Contact Address: \_\_\_\_\_

\_\_\_\_\_

Name of Organization: \_\_\_\_\_ Title: \_\_\_\_\_

Type of Activity: \_\_\_\_\_ Estimated Attendance: \_\_\_\_\_

Facilities/ Rooms/ Courts Requested: \_\_\_\_\_

This Request is:    Ongoing                    One-time

Day/Dates/Times Requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Equipment Request:

<u>Equipment</u>	<u>Quantity</u>
Chair(s)	_____
Table(s)	_____
Volleyball Net(s)	_____
Badminton Net(s)	_____
Soccer Goal(s)	_____
Overhead Projector/Screen	_____
TV/VCR	_____
Field Marking	_____
Other:	_____
Please specify: _____	_____

**Please note any special set-up arrangements here:**

